PTO





PTO/SB/05 (2/98)

Approved for use through 09/30/2000. OMB 0651-0032 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

1-18-02

UTILITY TRANSMITTAL PTO SB 05, 9/99, (1/1)

•	UTILITY
	PATENT APPLICATION
	TRANSMITTAL

(Only for new nonprovisional applications under 37C.F.R. §1.53(b))

•Please type a plus sign (+) inside this box →

Attorney Docket No. PC11044ADAM

First Named Inventor or Application Identifier Janice A. Brown, et al.

Title METHODS OF DETECTING POLY(ADP-RIBOSE) PLYMERASE ENZYMATIC ACTIVITY

Express Mail Label No. EL912062293US

	APPLICATION ELEMENTS			DDBESS TO:		nt Commissioner for Patents			
See MPEP c	hapter 600 concerning utility patent applic	ation contents.	ADDRESS TO: Box Patent Application Washington, DC 20231						
1.	*Fee Transmittal Form (e.g., PTO/S Submit an original, and a duplicate for fee pro-	6. Microfiche Computer Program (Appendix)							
2.	Specification [Total Pag (preferred arrangement set forth below- - Descriptive title of the Invention - Cross References to Related Apples - Statement Regarding Fed sponsing - Reference in Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings - Detailed Description - Claim(s)	olications ored R&D		a. Comp b. Paper c. State	cessary) outer Readab r Copy (ident ment verifyin YING APP Papers (cover	g identity of above copies LICATION PARTS r sheet & document(s))			
	- Abstract of the Disclosure		10.	(when there is English Trans		e) nent (<i>if applicable</i>)			
	Drawing(s) (35 U.S.C. 11.3)[Total sh	eets 3]	11.	Information D. Statement (ID		Copies of IDS Citations			
4. 🖂	Oath or Declaration [Total pa	ges [3	12.	Preliminary A	mendment				
	a. Newly executed (original or		13.		pipt Postcard (MPEP 503)				
b. Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 comple [Note Box 5 below]			14.	(Should be specifically itemized) *Small Entity Statement filed in prior application, Statement(s) Status still proper and desired (PTO/SB/09-12)					
i. <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b).				Certified Copy (if foreign prior					
The ent copy of conside	Incorporation By Reference (useable tire disclosure of the prior application the oath or declaration is supplied usered to be part of the disclosure of the tion and is hereby incorporated by re	, from which a nder Box 4b, is e accompanying	14.	Other:		1002 U. 10/05			
		·	NOTE FO	RITEMS 1 & 14: IN ORI	DER TO BE ENT	TITLED TO PAY SMALL ENTITY RED (37 C.F.R. § 1.27), EXCEPT			
			IF ONE FIL	.ED IN A PRIOR APPLIC	CATION IS RELI	ED UPON (37 C.F.R. § 1.28).			
1 1	ONTINUING APPLICATION, check a								
	Continuation Divisional	Continuation	-in-part (C	CIP) of prid	or application	n No:/			
Prior a	application information: Exam	iner			Group/Art U	Unit:			
	18	. CORRESP	ONDEN	CE ADDRESS					
Custome	(Insert C er Number or Bar Code Label	ustomer No. or Attac	h bar code	e label here) or	Corresp	ondence address below			
Name									
Address	Pfizer Inc.								
Address	Patent Department, MS 4159, Easte								
City	Groton State				Zip Code	de 06340			
Country	United States Of America	Telephone	1-(86	0)-441-4901	Fax	1-(860)-441-5221			
NAME	(Print/type) Det orah A. Martin	/	Registrat	tion No. (Attorney/Agent)		44,222			

Signature

PTO/SB/17(2/98)
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	Complete if Known							
FEE TRANSMITTAL	Applica	Application Number To be assigned						
	Filing C	ate			Herewith			
Patent fees are subject to annual revision on October 1. These are the fees effective October 1., 2001.	First Na	amed In	ventor		Janice A. Brown, et al.			
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.	Examin	er Nam	е		To be assigned			
See 37 C.F.R. §§ 1.27 and 1.28.	Group/	Art Unit			To be assigned			
Total Amount of Payment (\$)992.00	Attorne		t No.		PC11044ADAM			
METHOD OF PAYMENT (check one)				FEE C	ALCULATION (continued)			
1. \(\simega\) The commissioner is hereby authorized to charge	3. ADDIT	IONAL F	EES	FEE C	ALCOLATION (COMMING	:0)		
indicated fees and credit any over payments to:	Large E			Entity				
Deposit Account Number	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Descript	ion	Fee Paid	
Deposit Account - Name Pfizer Inc.	105	130	205	65	Surcharge – late fee o	r oath		
Charge Any Additional Charge the Issue Fee Set in	127	50	227	25	Surcharge-late provisi cover sheet	onal filing fee or		
37 Fee Required Under 37 C.F.R. § 1.1.8 at the Mailing C.F.R. §§ 1.1.6 and 1.17. of the Notice of Allowance.	139	130	139	130	Non-English specificat	ion		
S. W. S. T. S. W. S. T. S. W. S. T. S. W. S. T. S. S. W. S. T. S. W. S. T. S.	147	2,520	147	2,520	For filing a request for	reexamination	$\overline{}$	
2. Payment Enclosed:	112	920*	112	920*	Requesting publication	of SIR prior to		
☐ Check ☐ Money Order ☐ Other	113	1,840*	113	1,840*	Examiner action Requesting publication Examiner action	•		
FEE CALCULATION	115	110	215	55	Extension for reply with	nin first month		
1. BASIC FILING FEE	116	400	216	200	Extension for reply with month			
Large Entity Small Entity	117	920	217	460	Extension for reply with	nin third month		
Large Entity Fee Fee Fee Fee Pee Fee Pee Fee Pee Fee F	118	1,440	218	720	Extension for reply with	nin fourth month		
101 740 201 370 Utility filing fee 740.00	128	1,960	228	980	Extension for reply with	in fifth month		
106 330 206 165 Design filing fee	119	320	219	160	Notice of Appeal			
107 510 207 255 Plant filing fee	120	320	220	160	Filing a brief in support	of an appeal	of an appeal	
108 740 208 370 Reissue filing fee	121	280	221	140	Request for oral hearing	g		
114 160 214 80 Provisional filing fee	138	1,510	138	1,510	Petition to institute a pu proceeding	iblic use		
SUBTOTAL (1) (\$) 740.00	140	110	240	55	Petition to revive - unav			
2. EXTRA CLAIM FEES	141	1,280	241	640	Petition to revive - unint	tentional		
Extra Fee from Claims below Fee Paid	142	1,280	242	640	Utility issue fee (or reiss	sue)		
Total Claims 11 -20**= 0 X 18 = 0	143	460	243	230	Design issue fee			
Independent	144	620	244	310	Plant issue fee			
Multiple Dependent	122	130	122	130	Petitions to the Commis	ssioner		
** or number previously paid, if greater; For Reissues, see below Large Entity Small Entity	123	50	123	50	Petitions related to prov applications	isiona!		
Fee Fee Fee Fee Description Code (\$) Code (\$)	126	180	126	180	Submission of Informati Statement	on Disclosure		
103 18 203 9 Claims in excess of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)			
102 84 202 42 Independent claims in excess of 3	146	740	246	370	Filing a submission after (37 CFR 1.129(a))			
104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 **Reissue independent claims over	149 Other Fee	740 (specifie)	249		For each additional inve examined (37 CFR 1.12			
original patent 110 18 210 9 **Reissue illuspendent daims over original patent **Reissue daims in excess of 20 and	ľ	Other Fee (specify) Other Fee (specify)						
over original patent					CURTOTAL (2) (2)			
SUBTOTAL (2) (\$) 252.00	T GOOGEO (Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$) 0			
Type or Printed Name Deborah A. Martin		_		_	Complete (if Applicab			
Signature Septration Septration	Date	T			Reg. Number Deposit Account	44,222 16-1445		
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